UNITED STATES DISTRICT COURT

DISTRICT OF OREGON

	Plaintiff(s),	Case No.:			
v.	Traintiff(s),	MOTION FOR LE PRO HAC VICE	MOTION FOR LEAVE TO APPEAR PRO HAC VICE		
	Defendant(s).				
			requests special admission <i>pro hac</i> t for the District of Oregon in the above-		
captioned case	e for the purposes of representi	ng the following party (or p	arties):		
with the Rules of Evide Court, and this I under District of Ore	State Bar; and 2) the sence, the Federal Rules of Civil Statement of Professions and that my admission to the egon is solely for the purpose of the conclusion of the matter	nat I have read and am familal and Criminal Procedure, the onalism. Bar of the United States Deficient on the above materials.	iar with the Federal he Local Rules of this istrict Court for the		
(1)	PERSONAL DATA:				
	Name:	(First Name)			
	City:				
	Phone number:	Fax numb	er:		
	Business e-mail address:				

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(2)	BAR ADMISSION INFORMATION:			
	(a)	State bar admission(s), date(s) of admission, and bar number(s): Pennsylvania, 2013, 316557; New Jersey, 2013, 085582013		
	(b)	Other federal court admission(s) and date(s) of admission: District of New Jersey (2013), Eastern District of Pennsylvania (2013)		
		Eastern District of Michigan (2022), District of Colorado (2020)		
(3)	CERTIFICATION OF DISCIPLINARY ACTIONS:			
7		not now, nor have I ever been, subject to any disciplinary action by any or federal bar association or subject to judicial sanctions.		
	I am now or have been subject to disciplinary action by a state or federal bar association or subject to judicial sanctions. (Attach letter of explanation.)			
(4)	CERTIFICATION OF PROFESSIONAL LIABILITY INSURANCE: Pursuant to LR 83-3, I have professional liability insurance, or financial responsibility equivalent to liability insurance, that meets the insurance requirements of the Oregon State Bar for attorneys practicing in this District, and that will apply and remain in force for the duration of the case, including any appeal proceedings.			
(5)	CM/ECF REGISTRATION: I acknowledge that I will become a registered user of the Court's case management and electronic case filing system (CM/ECF) upon approval of this application, and I consent to electronic service pursuant to Fed. R. Civ. P. 5(b)(2)(E) and the Local Rules of the District of Oregon.			
Certification of requirements of	f Attorne LR 83-3	ey Seeking <i>Pro Hac Vice</i> Admission: I have read and understand the , and I certify that the above information is true and correct.		
DATED	: 08/15/20)24		
		(Signature)		

REQUIREMENT TO ASSOCIATE WITH LOCAL COUNSEL:

LR 83-3(a)(1) requires applicants for pro hac vice admission to associate with local counsel, unless requesting a waiver of the requirement under LR 45-1. To request a waiver of the requirement to associate with local counsel under LR 45-1, check the following box: I seek admission for the limited purpose of filing a motion related to a subpoena that this Court did not issue. Pursuant to LR 45-1(b), I request a waiver of the LR 83-3(a)(1) requirement to associate with local counsel and therefore do not include a certification from local counsel with this application. To associate with local counsel, provide the following information about local counsel, and obtain the signature of local counsel. Name: Stephens, Kim D. (Last Name) (First Name) (MI) (Suffix) OSB number: 030635 Agency/firm affiliation: Tousley Brain Stephens PLLC Mailing address: 1200 Fifth Avenue, Suite 1700 98101 City: Seattle State: WA Zip: _____ Phone number: (206) 682-5600 Fax number: (206) 682-2992 Business e-mail address: kstephens@tousley.com CERTIFICATION OF ASSOCIATE LOCAL COUNSEL: I certify that I am a member in good standing of the bar of this Court, that I have read and understand the requirements of LR 83-3, and that I will serve as designated local counsel in case number 3:24-cv-1215

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